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|---|---------------------------------------|-------------------------------|--------------------------|------------------------------------|----------|-------------------------------------|-------------------------------------|------------------|--------------------------|---------------------------------------|----------|--------------------------|--------------------------------------|----------|--------------------------|--------------------------------------|----------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 C.F.R. § 1.136(a)</b>  |                                       | Atty. Docket No. 00-41 C1 RCE |                          |                                    |          |                                     |                                     |                  |                          |                                       |          |                          |                                      |          |                          |                                      |          |
| <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">Inventor(s): DENYER et al.</div> <div style="display: flex; justify-content: space-between; border: 1px solid black; padding: 2px; margin-bottom: 2px;"><div>Appln. No.: 09/930,582</div><div>Conf. No.: 3302</div></div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">Filed: August 15, 2001</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;">Title: Controlling Drug Delivery Apparatus</div> <div style="display: flex; justify-content: space-between; border: 1px solid black; padding: 2px; margin-bottom: 2px;"><div>Examiner: Mendoza, M.</div><div>Group Art Unit: 3761</div></div> <div style="border: 1px solid black; padding: 2px;">Express Mail Label No. (if applicable): EL 997384645 US</div>  |                                       |                               |                          |                                    |          |                                     |                                     |                  |                          |                                       |          |                          |                                      |          |                          |                                      |          |
| <p>This is a request under the provisions of 37 C.F.R. § 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee from the original due date of <u>August 18, 2005</u> are as follows:</p> <p><i>(check time period desired)</i></p> <table style="width: 100%; border-collapse: collapse;"><tr><td style="width: 15%;"><input type="checkbox"/></td><td style="width: 60%;">One month - 37 C.F.R. § 1.17(a)(1)</td><td style="width: 25%; text-align: right;">\$ _____</td></tr><tr><td><input checked="" type="checkbox"/></td><td>Two months - 37 C.F.R. § 1.17(a)(2)</td><td style="text-align: right;">\$ <u>450.00</u></td></tr><tr><td><input type="checkbox"/></td><td>Three months - 37 C.F.R. § 1.17(a)(3)</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/></td><td>Four months - 37 C.F.R. § 1.17(a)(4)</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/></td><td>Five months - 37 C.F.R. § 1.17(a)(5)</td><td style="text-align: right;">\$ _____</td></tr></table> <p>Less the previous extension fee of \$ _____ paid in papers dated _____, which were filed in the present application subsequent to the original due date.</p> <div style="margin-top: 10px;"><input checked="" type="checkbox"/> Fee Transmittal Form Attached. <i>(Submit original and a duplicate for fee processing)</i></div> <div><input type="checkbox"/> A check covering the amount due of \$ _____ is enclosed (check no. _____).</div> <div><input checked="" type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to Deposit Account No. 50-0558.</div> <div><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-0558. A duplicate copy of this sheet is enclosed.</div> <p>I am the <input type="checkbox"/> assignee of record of the entire interest.</p> <p style="margin-left: 40px;"><input type="checkbox"/> applicant.</p> <p style="margin-left: 40px;"><input checked="" type="checkbox"/> attorney or agent of record.</p> <p style="margin-left: 40px;"><input type="checkbox"/> attorney or agent acting under 37 C.F.R. § 1.34(a), Registration No. 44,256</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="width: 40%;"><p>_____<br/>October 18, 2005<br/>Date</p></div><div style="width: 50%; text-align: center;"><p>_____<br/><br/>Signature</p><p>_____<br/>Timothy Nathan<br/>Typed Name</p></div></div> |                                       |                               | <input type="checkbox"/> | One month - 37 C.F.R. § 1.17(a)(1) | \$ _____ | <input checked="" type="checkbox"/> | Two months - 37 C.F.R. § 1.17(a)(2) | \$ <u>450.00</u> | <input type="checkbox"/> | Three months - 37 C.F.R. § 1.17(a)(3) | \$ _____ | <input type="checkbox"/> | Four months - 37 C.F.R. § 1.17(a)(4) | \$ _____ | <input type="checkbox"/> | Five months - 37 C.F.R. § 1.17(a)(5) | \$ _____ |
| <input type="checkbox"/>  | One month - 37 C.F.R. § 1.17(a)(1)    | \$ _____                      |                          |                                    |          |                                     |                                     |                  |                          |                                       |          |                          |                                      |          |                          |                                      |          |
| <input checked="" type="checkbox"/>   | Two months - 37 C.F.R. § 1.17(a)(2)   | \$ <u>450.00</u>              |                          |                                    |          |                                     |                                     |                  |                          |                                       |          |                          |                                      |          |                          |                                      |          |
| <input type="checkbox"/>  | Three months - 37 C.F.R. § 1.17(a)(3) | \$ _____                      |                          |                                    |          |                                     |                                     |                  |                          |                                       |          |                          |                                      |          |                          |                                      |          |
| <input type="checkbox"/>  | Four months - 37 C.F.R. § 1.17(a)(4)  | \$ _____                      |                          |                                    |          |                                     |                                     |                  |                          |                                       |          |                          |                                      |          |                          |                                      |          |
| <input type="checkbox"/>  | Five months - 37 C.F.R. § 1.17(a)(5)  | \$ _____                      |                          |                                    |          |                                     |                                     |                  |                          |                                       |          |                          |                                      |          |                          |                                      |          |

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